PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE perwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Application Number 10/029,173 Filing Date TRANSMITTAL December 28, 2001 First Named Inventor **FORM** Watson et al. Art Unit 2181 **Examiner Name** Hamza Not you gooig (to be used for all correspondence after initial filing) Attorney Docket Number 20009.0063US01 (BS01-325) Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC Petition (Appeal Notice, Brief, Reply Brief) Amendment/Reply Petition to Convert to a Proprietary Information After Final **Provisional Application** Power of Attorney, Revocation Status Letter Change of Correspondence Address Affidavits/declaration(s) Other Enclosure(s) (please Identify **Terminal Disclaimer Extension of Time Request** below): Return Postcard Request for Refund **Express Abandonment Request** Check in the amount of \$650.00 for additional claims. CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s)

## Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name WITHERS & KEYS, LLC Signature Printed name Jeramie J. Keys Date June 21, 2005 Reg. No. 42,724

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Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/029,173 Application Number TRANSMITTA December 28, 2001 Filing Date For FY 2005 Watson et al. First Named Inventor Hamza **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27 2181 Art Unit (\$) 650.00 20009.0063US01 (BS01-325) TOTAL AMOUNT OF PAYMENT Attorney Docket No. METHOD OF PAYMENT (check all that apply) √ Check | Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES FILING FEES SEARCH FEES Small Entity Small Entity Small Entity** Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) 200 100 500 300 Utility 150 250 130 65 200 100 100 50 Design 160 80 200 100 300 150 Plant 600 300 300 500 250 Reissue 150 0 n Provisional 200 100 **Small Entity** 2. EXCESS CLAIM FEES Fee (\$) Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 180 360 Multiple dependent claims Fee Paid (\$) **Multiple Dependent Claims** Extra Claims Fee (\$) **Total Claims** x 50.00 Fee Paid (\$) 9 Fee (\$) HP = highest number of total claims paid for, if greater than 20 Fee Paid (\$) Fee (\$) Indep. Claims Extra Claims 1 200.00 = 200.00\_ - 3 or HP = ¥ HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee Paid (\$) Fee (\$) **Extra Sheets Total Sheets** (round up to a whole number) x - 100 = Fees Paid (\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) SUBMITTED BY Registration No. 42,724 Telephone 678-565-4748 Signature

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Jeramie J. Keys

Name (Print/Type)